CALIFORNIA FORM

TAXABLE	YEAF

2023

Charitable Remainder and Pooled Income Trusts

541-	B
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Name of trust					FEIN		
Name of trust	ee(s)						
Additional info	rmation (see instructions)						
Street addres	s (number and street) or PO box				Apt. no./s	te. no.	PMB/private mailbox
City		ZIP cod	e				
Foreign count	rv name	Foreign provinc	ce/state/countv			Foreian	postal code
	created (mm/dd/yyyy)	_	_		_		_
	st (1) Charitable lead trust (2) Charitable rem	nainder annuity trust	: (3) Charital	ble remainder unitru	st (4) 🔛 F	ooled ind	come fund (5) Other
Fair Market Va	alue (FMV) of assets at end of taxable year		Gross Income				
Check the a	pplicable box: 🗌 Initial Tax Return 🔹 🗌 F	- Final Tax Return	Amendec	Tax Return	New Tr	ustee	New Address
Part I In	come and Deductions (All Trusts complete Section	ns A through D)					
Section A –	Ordinary Income						
1 Interest	income					1	00
2a Ordinary	v dividends (including qualified dividends)					2a	00
b Qualified	I dividends (see instructions)		2	ו	00		
3 Busines	s income (or loss). Attach federal Schedule C (Forn	m 1040)			•	3	00
4 Rents, r	oyalties, partnerships, other estates and trusts, etc.	. Attach federal Sc	hedule E (Form	1040)	•	4	00
5 Farm inc	come (or loss). Attach federal Schedule F (Form 10	•	5	00			
6 Ordinary	gain (or loss). Attach Schedule D-1				•	6	00
7 Other in	come. State nature of income				●	7	00
	linary income. Add lines 1, 2a, and 3 through 7 \ldots				•	8	00
	Capital Gains (Losses)						
	tal gain (loss) from Schedule D (541), line 8					9	00
	sed capital loss carryover from Schedule D (541) .					10	00
11 Unrecap	tured IRC Section 1250 gain		11		00		
	pital gains (losses). Combine lines 9 and 10 Nontaxable Income					12	00
	not interest					13	00
	ntaxable income. Add lines 13 and 14				·····	14	00
	Under penalties of perjury, I declare that I have examined t					the best of	of my knowledge and belief, it is
Sign Here	true, correct, and complete. Declaration of preparer (other	than taxpayer) is base	ed on all informatio	on of which preparer h	nas any know	ledge.	,
liele	Signature of trustee or officer representing trustee				Date)	
	X Preparer's signature		Date	Check if s	self-	PTIN	
Paid	X			employed			
Paid Preparer's	Firm's name (or yours, if self-employed) and address		I	I	• F	Firm's FE	IN
Use Only					Tele	phone	
	May the FTB discuss this tax return with the preparer s	shown above (see ir	nstructions)?		••••••	Yes	No

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Section D – Deductions

16	Interest	16	00
17	Taxes	17	00
18	Trustee fees	18	00
19	Attorney, accountant, and tax return preparer fees	19	00
20	Other allowable deductions. Attach schedule	20	00
21	Total (Add lines 16 through 20)	21	00
22	Charitable deduction		

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Section E – Deductions Allocable to Income Categories (IRC Section 664 trust only)

23a Enter the amount from line 21 allocable to ordinary income	23a	00
b Subtract line 23a from line 8	23b	00
24a Enter the amount from line 21 allocable to capital gains (losses)	24a	00
b Subtract line 24a from line 12	24b	00
25a Enter the amount from line 21 allocable to nontaxable income	25a	00
b Subtract line 25a from line 15	25b	00

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	Part I	l Un	related	Business	Taxable	Income
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If "Yes," file a separate Form 541 to rep			or overpaid tax S	S	
Part III Schedule of Distributable Inco		only)	(6)		(a)
Accumulations	(a) Ordinary ind	come	(b) Capital gains (losses)	Nonta	(c) axable income
 27 Undistributed income from prior taxable 28 Current taxable year net income year (before distributions)	line 23b line 24b				
 In column (c), enter the amount from 29 Total distributable income. Add lines 27 					
Part IV-A Distributions of Principal for					
 30 Principal distributed in prior taxable yes 31 Principal distributed during the current Fill in the information for columns (A), (A) Payee's name and address 	ars for charitable purposes taxable year for charitable pu	poses. ount distributed			00
a				31a	00
b				31b	00
C				31c	00
32 Total. Add lines 30 through 31c				● 32	00
	side and Income Distribution			222	
33a Accumulated income set aside in prior 33b Enter the amount shown on Side 2, line					00
34 Add lines 33a and 33b				34	00
 35 Distributions made during the taxable y For income set aside in prior taxable For charitable purposes for which a cl Fill in the information for columns (A), (A) Payee's name and address 	years for which a deduction v naritable deduction was claime	d under IRC Section ount distributed	on 642(c) in the current taxable		
a				35a	00
b					
C				35b	00
				35c	00
36 Add lines 35a through 35c				36	00
37 Carryover. Subtract line 36 from line 34	<u></u>			37	00

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Part V Balance Sheet

Assets			(a) Beginning-of-Year Book Value	(b) End-of-Year Book Value	(c) FMV (see instructions)
38 Cash – non-interest bearing		38			
39 Savings and temporary cash investments		39			
40 a Accounts receivable	40a				
b Less: allowance for doubtful accounts	40b				
41 Receivables due from officers, directors, trustees, and	d				
other disqualified persons. Attach schedule		41			
42 a Other notes and loans receivable	42a				
b Less: allowance for doubtful accounts	42b				
43 Inventories for sale or use		43			
44 Prepaid expenses and deferred charges		44			
45 a Investments – U.S. and state government obligatio	ns. Attach schedule	45a			
b Investments – corporate stock. Attach schedule		45b			
c Investments – corporate bonds. Attach schedule		45c			
46 a Investments – land, buildings, and equipment basis	3.				
Attach schedule	46a				
b Less: accumulated depreciation	46b				
47 Investments – other. Attach schedule		47			
48 a Land, buildings, and equipment (trade or business):					
basis	48 a				
b Less: accumulated depreciation	48b				
49 Other assets. Describe	· · · ·	49			
50 Total assets. Add lines 38 through 49		50	•	•	•
Liabilities					
51 Accounts payable and accrued expenses		51			
52 Deferred revenue		52			
53 Loans from officers, directors, trustees, and other dis	qualified persons	53			
54 Mortgages and other notes payable. Attach schedule.		54			
55 Other liabilities. Describe	····	55			
56 Total liabilities. Add lines 51 through 55		56	•	•	
Net Assets					
57 Trust principal or corpus		57			
58 a Undistributed income		58a			
b Undistributed capital gains		58b			
c Undistributed nontaxable income		58c			
59 Total net assets. Add lines 57 through 58c		59	•	•	
60 Total liabilities and net assets. Add line 56 and line	59	60			

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Da	rt VI-A Charitable Remainder Annuity Trust (CRAT) Information (Complete only if an IRC Section 664 CRAT)				
	a Enter the initial fair market value (FMV) of the property placed in the trust	61a			00
01	b Enter the total annual annuity amounts for all recipients.	61b			00
Da	rt VI-B Charitable Remainder Unitrust (CRUT) Information (Complete only if an IRC Section 664 CRUT)	015	<u> </u>		
	Is the CRUT a net income charitable remainder unitrust (NICRUT) as described in IRC Regulations Section 1.664-3(a)(1)(i)	(h)(1)	2	Yes	
	Is the CRUT a net income with make-up charitable remainder unitrust (NIMCRUT) as described in IRC Regulations Section 1.664-			_	
	Did the trust change its method of payment during the taxable year?			_	
•.	If "Yes," describe the triggering event. Include the date of the event and the old method of payment.			,	
65	a Enter the unitrust fixed percentage to be paid to the recipients	65a			%
	b Unitrust amount. Subtract line 56, column (c) from line 50, column (c) and multiply the result by the percentage				
	on line 65a	65b			00
	If "Yes," on line 62 or line 63, go to line 66a. Otherwise skip lines 66a through 67b and enter the line 65b				
	amount on line 68.				
66	a Trust's accounting income for 2023. Attach schedule	66a			00
	If "Yes," on line 62, go to line 66b. If "Yes," on line 63, skip line 66b and go to line 67a.				
	b Enter the smaller of line 65b or line 66a here and on line 68. Skip lines 67a and 67b.	66b			00
67	a Total accumulated distribution deficiencies from previous years	67a			00
	b Add lines 65b and 67a.	67b			00
	If lines 67a and 67b are completed, enter the smaller of line 66a or line 67b on line 68.				
68	Required unitrust distribution for 2023	68			00
69	Carryover of accumulated distribution deficiency (only for trusts that answered "Yes" on line 63.)				
	Subtract line 68 from line 67b	69			00
70	If this is the final tax return, enter the initial FMV of all assets placed in trust by the donor.	70			00
	Did the trustee change the method of determining the FMV of the assets? If "Yes," attach an explanation.				No.
72	Were any additional contributions received by the trust during 2023? If "Yes," complete Side 6, Schedule A, Part III			Yes	
Pa	rt VII Questionnaire for Charitable Lead Trusts, Pooled Income Funds, and Charitable Remainder Trusts				
Sec	tion A – All Trusts				
73	Check this box if any of the split-interest trust's income interests expired during 2023				
74	Check this box if all of the split-interest trust's income interests expired before 2023				🗌
	If either box is checked and this is not a final tax return, attach an explanation.				
Sec	tion B – Charitable Lead Trusts				
	Enter the amount of annuity or unitrust payments required to be paid to charitable beneficiaries for 2023	75			00
	tion C – Pooled Income Funds				
	Enter the amount of contributions received during 2023	76			00
	Enter the amount required to be distributed for 2023 to satisfy the remainder interest	77			00
	Enter any amounts that were required to be distributed to the remainder beneficiary that remain undistributed	78			00
	Enter the amount of income required to be paid to the charitable remainder beneficiary for 2023	79			00
	tion D – Charitable Remainder Trusts				
80	Check this box if you are filing for a charitable remainder annuity trust or a charitable remainder unitrust whose charitable i				_
	involve only cemeteries or war veterans' posts.				••••
81	Check this box if you are making an election under IRC Regulations Section $1.664-2(a)(1)(i)(a)(2)$ or $1.664-3(a)(1)(i)(g)(2)$				_
00	income generated from certain property distributions (other than cash) by the trust as occurring on the last day of the taxa				
	Is this the initial tax return? If "Yes," attach a copy of the trust instrument				
	Was the trust instrument amended during the year? If "Yes," attach a copy				
	If this is the final tax return, were final distributions made according to the trust instrument?				
	If "Yes," did you complete Side 3, Part IV-A, line 31?			162	
G	н но, олрнанн wity				
85	If this was the final year, was an early termination agreement signed by all parties to the trust?]	Yes 🗆	No	
	If "Yes," attach a copy of the signed agreement.	[
86	At any time during the calendar year 2023, did the trust have an interest in or a signature or other authority over a bank, se	curitie	S.		
	or other financial account in a foreign country?			Yes	□ No
	If "Yes," enter the name of the country.				

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Schedule	Δ-	- Distributions,	Assets, and	d Donor	Information
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Pa	rt I Accumulation Schedule (IRC S	ection 664 trust only)			
	Accumulations		(a) Ordinary ii	ncome	(b) Capital gains (losses)	(c) Nontaxable income
1	Total distributable income.					
	Enter the amount from Side 3, Part III,	line 29				
2a	Total distributions for 2023.					
2b	2023 distributions from income					
3	Undistributed income at end of taxable y	ear.				
	Subtract line 2b from line 1					
Ра	rt II-A Current Distributions Schedu	Ile (IRC Section 664 t	rust only)			
	(a)			(b)		(C)
	Name of recipient		Identif	ying number	Percentage of total u	unitrust amount payable (if applicable)
4a	•		•		•	%
4b	•		•			%
4c						%
	(d)	(e)		(f)	(g)	(h)
	Ordinary income	Capital gains	Nontax	kable income	Corpus	Total. Add cols. (d) through (g)
4a	•				•	
4b						
4c						
Tota	al					
If P	art II-A Total, column (h) does not agree	with line 61b for a C	RAT or line 68 for	a CRUT, check	chere and attach explanation	
					· · ·	
Pa	rt II-B Current Distributions (char	itable lead trust or po	oled income funds	s only)		
5	Enter the amount required to be paid to			• /		¢
<u> </u>			101 2020			· · · · · · · · · · · · · · · · · · ·
	rt III Assets and Donor Information					
6	Is this the initial tax return or were addi		ited to the trust in	2023?		Yes 🗌 No
	If "Yes," complete the schedule below					
	If "No," complete only column (a) of th	e schedule below.				
	(a) Name and address of donor	(b) Description of each	hatenoh tazze r	FMV of each	(c) n asset on date of donation	(d) Date of donation (mm/dd/yyyy)
_		Description of caci				
7a						
7b						
7c						
	Tetel Add Bree 7: 11 1 7					
7d	Total. Add lines 7a through 7c					

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